

PROB 12B  
(7/93)

**United States District Court**

**for**

**District of New Jersey**

**Request for Modifying the Conditions or Term of Supervision  
with Consent of the Offender**

*(Probation Form 49, Waiver of Hearing is Attached)*

Name of Offender: Brenda Tello

Cr.: 06-00728-001

Name of Sentencing Judicial Officer: The Honorable Jose L. Linares

Date of Original Sentence: 02/23/07

Original Offense: Narcotics Importation/Exportation

Original Sentence: 60 months probation term

Type of Supervision: Probation

Date Supervision Commenced: 02/23/07

**PETITIONING THE COURT**

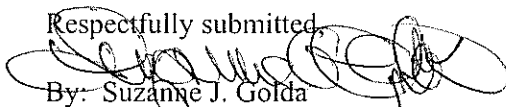
- ☐ To extend the term of supervision for \_\_\_\_\_ Years, for a total term of \_\_\_\_\_ Years.  
☒ To modify the conditions of supervision as follows. The addition of the following special condition(s):

The defendant shall participate in a mental health program for evaluation and/or treatment as directed by the U.S. Probation Office. The defendant shall remain in treatment until satisfactorily discharged and with the approval of the U.S. Probation Office.

**CAUSE**

The offender reports and displays symptoms of anxiety and depression.

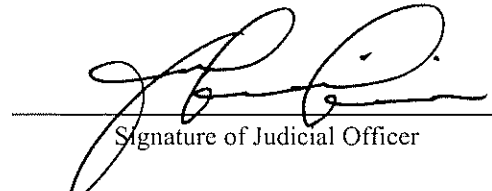
Respectfully submitted,

By:   
Suzanne J. Golda  
U.S. Probation Officer

Date: 04/08/08

**THE COURT ORDERS:**

- ☒ The Modification of Conditions as Noted Above  
☐ The Extension of Supervision as Noted Above  
☐ No Action  
☐ Other

  
Signature of Judicial Officer

4-15-08  
Date

PROB 49  
(3/89)

**UNITED STATES DISTRICT COURT  
FOR THE  
DISTRICT OF NEW JERSEY**


**Waiver of Hearing to Modify Conditions  
of Probation/Supervised Release or Extend Term of Supervision**

I have been advised and understand that I am entitled by law to a hearing and assistance of counsel before any unfavorable change may be made in my Conditions of Probation and Supervised Release or my period of supervision being extended. By "assistance of counsel," I understand that I have the right to be represented at the hearing by counsel of my own choosing if I am able to retain counsel. I also understand that I have the right to request the court to appoint counsel to represent me at such a hearing at no cost to myself if I am not able to retain counsel of my own choosing.

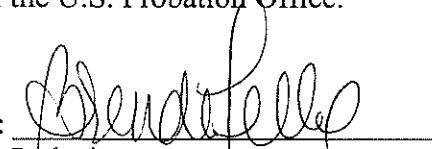
I hereby voluntarily waive my statutory right to a hearing and to assistance of counsel. I also agree to the following modification of my Conditions of Probation and Supervised Release or to the proposed extension of my term of supervision:

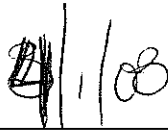
The defendant shall participate in a mental health program for evaluation and/or treatment as directed by the U.S. Probation Office. The defendant shall remain in treatment until satisfactorily discharged and with the approval of the U.S. Probation Office.

Witness:

  
United States Probation Officer  
Suzanne J. Golda

Signed:

  
Probationer  
Brenda Tello



DATE